

FEB. 4. 2004 5:33PM

TOWNSEND & TOWNSEND

NO. 1097 P. 1

Atty Docket No. 016747-015210US

PTO FAX NO.: (703) 872-9306

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Group Art Unit 2124

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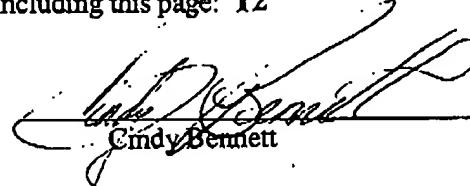
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Document(s) Attached

1. Fee Transmittal (1 page);
2. Transmittal Form (1 page); and
3. Amendment (9 pages).

Number of pages being transmitted, including this page: 12

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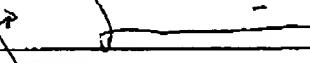
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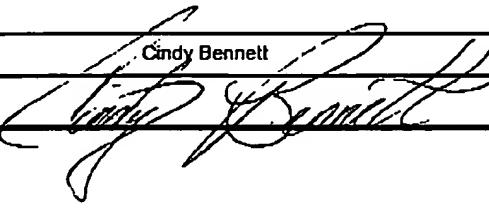
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60134403 v1

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/802,020
		Filing Date	March 8, 2001
		First Named Inventor	Saulsberry, Ashley
		Art Unit	2124
		Examiner Name	Do, Chat C.
Total Number of Pages in This Submission	11	Attorney Docket Number	016747-015210US

ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	
		Remarks	
		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.	

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Date	Reg. No. 43,616 February 4, 2004	

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